

REQUIREMENTS & INSTRUCTIONS - DETECTIVE or GUARD AGENCY

SOLE W/EMPLOYEES/ ENTITY

Access this form via website at: www.state.hi.us/dcca/pvl

WHO MUST BE LICENSED? This application should be used by a corporation, partnership, joint venture, limited liability company, limited liability partnership or sole proprietor with employees who intends doing business in Hawaii as a private detective or guard agency. If both licenses are desired, a detective agency AND a guard agency, separate applications are required.

The sole proprietor with employees who is starting a business or the "*Principal*" of a corporation, partnership, joint venture, limited liability company (LLC) or limited liability partnership (LLP) is also required to apply for a Private Detective or Guard license on a separate application. (See Board's form PDG-02).

THE STEPS TO FOLLOW TO APPLY FOR A LICENSE ARE OUTLINED BELOW:

INSTRUCTIONS FOR FILING

EMPLOYMENT RECORDS

Each officer, director, partner, manager and member must complete an "*Employment Record*" form (attached) covering employment over the past 10 years. This form may be duplicated as needed.

Attach completed "Employment Record(s)".

CRIMINAL ABSTRACTS

Obtain criminal abstracts for each officer, director, partner, manager and member from all localities that officers, directors, partners, managers and members have resided in the **last 10 years**.

FOR HAWAII APPLICANTS: Contact the Hawaii Criminal Justice Data Center at 587-3100 or visit their website at: www.state.hi.us/hcjdc to request a form.

OUT-OF-STATE APPLICANTS: Contact the local authority or board in each of the locations you have resided in during the past 10 years for their forms and instructions on obtaining criminal abstracts.

Some agencies in other states that provide abstracts, may not release information for licensing purposes. If this is the case, contact us for instructions.

Note: California Abstracts - The California Department of Justice, Bureau of Criminal Identification and Information requires completion of a ten-print finger print card and processing fee of \$27. Please call our office at (808)-586-3000 for a ten-print fingerprint card.

ENTITY REGISTRATION: CORPORATION, PARTNERSHIP, JV, LLC OR LLP

If the applicant is a corporation, partnership, joint venture, LLC or LLP, we will require the following proof to show that the entity is properly registered with the Business Registration Division (BREG), Department of Commerce and Consumer Affairs, State of Hawaii, P.O. Box 40, Honolulu, HI 96801. Call (808) 586-2727 or visit their website at: www.businessregistrations.com/home.html to order Certificates of Good Standing, forms, etc.

If the entity has been registered in this state for LESS THAN ONE (1) YEAR, ATTACH a "*filed-stamped*" copy of the document filed with Breg; or the same certificate mentioned below.

If the entity has been registered in this state for MORE THAN ONE (1) YEAR, ATTACH a current "*Certificate of Good Standing*" or a "*Certificate of Qualification*" issued not more than 12 months ago.

APPLICATION

- 1) Complete application using a typewriter or print legibly in **black** ink.
- 2) Answer all questions. If a question/item is not applicable to the firm, please indicate that it is not applicable with, "NA."
- 3) Business Location in Hawaii - Indicate under the "*Business Location*" the Hawaii office location where the firm will receive service of papers. (P.O. Box is not sufficient.)
- 4) "*Principal*" designation - Provide name and other information on the person who will be responsible for the direct management and control of the agency.
Please note that the Principal is required to be licensed in and a resident of Hawaii. The License Number of the Principal is asked for. If the designated person does not have a license and is applying for one, indicate this fact with, "*Applied on (date).*"
- 5) Application must be signed by the sole owner, officer, or partner.

FEE

Attach the nonrefundable application fee of \$100 made payable to: **COMMERCE & CONSUMER AFFAIRS**.

PLACE OF BUSINESS A licensed agency shall have and maintain a definite place of business where the licensee may be served notice and legal process in the STATE OF HAWAII. Post Office Box number is not acceptable as a place of business.

BOARD'S ADDRESS Mail all required items/documents to: Deliver to office location at:
Board of Private Detectives & Guards or 1010 Richards St.
DCCA, PVL Licensing Branch Honolulu, HI 96813
P.O. Box 3469 Phone: (808) 586-3000
Honolulu, HI 96801

ABANDONED OF APPLICATION Your application may be considered abandoned and may be destroyed, if, after two years, you fail to provide the Board evidence of your efforts to complete the licensure process.

APPLICANT CHECKOUT This is a summary of the items/documents that must be in the Board's office before the application is considered by the Board for licensure. It may be used by you to check if all items have been submitted.

- Have you?
- ☐ Answered all questions on the application form?
 - ☐ Signed (one of the officers, partners, manager or member) the application?
 - ☐ Designated a "*Principal*" detective or guard?
 - ☐ Provided a business location in Hawaii on the application form?
 - ☐ Attached evidence of registration of the corporation, partnership, joint venture, LLC or LLP?
 - ☐ Attached criminal abstracts for all officers, directors, partners, managers and members which cover 10 years?
 - ☐ Attached employment records of all officers, directors, partners, managers and members covering 10 years?
 - ☐ Attached the \$100 applicable fee made payable to Commerce & Consumer Affairs?
 - ☐ Is check signed and dated?

Your application is considered complete when **ALL REQUIRED DOCUMENTS** are in the Board's office. Licensing must be completed within one year of the application date.

BOARD INTERVIEW

BOARD INTERVIEW The Board usually meets in February, April, June, August, October and December.

Applications that are "complete" 30 days before a board meeting are scheduled for board review. Upon receipt of all required items, the Board will send notice to the applicant to appear at the board meeting. An officer or a partner of the applicant may be required to appear at the meeting. The "principal" must appear at the meeting.

Notification regarding the Board's decision will be sent through the mail. To protect the privacy of applicants, results are not released over the phone.

LICENSE REQUIREMENTS

Applicants approved by the Board will be required **to submit the following** items before a license will be issued:

BOND A bond of not less than \$5,000 on the form provided. Bond form must be notarized by both the applicant and surety issuing the bond. Surety must indicate on Bond form if Bond No. is for a Private Detective Agency or Guard Agency.

LICENSE FEES

- If a license is issued between July 1, **even**-numbered year to June 30, **odd**-numbered year, pay..... \$260
(License fee-\$50, Compliance Resolution Fund-\$110, 1/2 Renewal fee-\$100)
- If a license is issued between July 1, **odd**-numbered year to June 30, **even**-numbered year, pay\$105**
(License fee-\$50, Compliance Resolution Fund-\$55)

Make checks payable to: Commerce & Consumer Affairs.

(Continued)

****All licenses, regardless of issuance date, are subject to renewal on or before June 30 of each even-numbered year. If the agency is eligible for a license near the end of the two-year license period (within 3 months), the agency may elect to delay issuance of license until the next license period provided the agency does not conduct business until the start of the new license period or when license is issued, whichever is later.**

Note: *One of the numerous legal requirements that you must meet in order for your new license to issue is the payment of fees as set forth in this application. You may be sent a license certificate before the check you sent us for your required fees clears your bank. If your check is returned to us unpaid, you will have failed to pay the required licensing fee and your license will not be valid, and you **may not** do business under that license. Also, a \$15.00 service fee will be charged for checks which are returned by the bank.*

If for any reason you are denied the license you are applying for, you may be entitled to a hearing as provided by Title 16, Chapter 201, Hawaii Administrative Rules, and/or Chapter 91, Hawaii Revised Statutes. Your written request for a hearing must be directed to the agency that denied your application, and must be made within 60 days of notification that your application for a license has been denied.

GUARD UNIFORM CLEARANCE

Photographs of the guard uniform, emblem and badge (Chapter 16-97-14, HAR) will be required for the Board and police departments of each county where you will be doing business.

ENTITY/PRINCIPAL DEPENDENCY

A corporation, partnership, joint venture, LLC or LLP cannot be issued a license without having in its employ a "Principal" detective or guard. The entity must file a separate application from the "Principal" and both must pay separate fees in order to be licensed.

MAINTAINING YOUR LICENSE

EMPLOYEE REGISTRATION FORM

Pursuant to Chapter 16-97-15 HAR, List of employees, (c) every agency shall submit a list to the board, within ten (10) calendar days after the end of each calendar quarter, on an Employee Registration Form, which contains the names, addresses, dates of birth, and the dates of hire and termination of all employees doing any type of investigative or guard work, and other information required on the form. These forms will be mailed to you with your Notice of Licensure.

MAINTAIN BOND

Maintain a bond in force at all times. Failure to maintain bonding will result in automatic suspension of license and the Board may take action against your license.

PLACE OF BUSINESS

A licensed Private Detective or Guard Agency shall have and maintain a definite place of business where the licensee may be served notice and legal process in the State. A Post Office Box number is not accepted as a place of business.

BIENNIAL RENEWAL

All licenses, regardless of issuance date, are subject to renewal on or before **June 30, of each even-numbered year.** Payment of renewal fees, information relative to conviction of the licensee of a crime which reflects unfavorably on the fitness of the licensee to engage in the profession, whether any psychiatric or psychological treatment has been recommended to the licensee, and evidence of a current bond are required. Licensees renewing after the expiration date and within one year are required to restore their licenses and are assessed a penalty.

Licensees who do not restore their licenses within the one year period are required to file as new applicants.

APPLICATION FOR LICENSE – GUARD or PRIVATE DETECTIVE AGENCY*Read the requirements and instructions before completing this application.*

Name of Applicant: (give name of person, corporation, partnership, joint venture, LLC or LLP)

Business or Trade Name (if one will be used):

Business Location (physical address):

Mailing Address (ONLY if different from business location):

Phone No. (days):

Type of AGENCY LICENSE being applied for (circle only one):

GUARD

PRIVATE DETECTIVE

Name of "PRINCIPAL" detective or guard who will be responsible for the direct management and control of agency.

FOR OFFICE USE

License No.

Effective Date

Type of BUSINESS ENTITY:

CORPORATION

SOLE PROPRIETOR
W/EMPLOYEES

PARTNERSHIP

LIMITED LIABILITY COMPANY

JOINT VENTURE

LIMITED LIABILITY PARTNERSHIP

License No. of Principal

Social Security No. of Principal

Full Name and Title	Social Security No.	Residence Address (P.O. Box not acceptable) (Include Street Address, Apt. No., City, State & Zip Code)	Residence Phone
President, Partner, Manager or Member			
Vice-President, Partner, Manager or Member			
Secretary, Partner, Manager or Member			
Treasurer, Partner, Manager or Member			
Director			
Director			

AFFIDAVIT OF APPLICANT:

I solemnly swear that the answers and statements contained in this application are true and correct. I understand that misrepresentation is grounds for refusal or subsequent revocation of license (*Section 710-1017, Hawaii Revised Statutes*).

Date

Signature of Officer, Partner, Sole Proprietor, Manager or Member

Name _____

Title _____

This material can be made available for individuals with special needs. Please call the Licensing Branch Manager at (808) 586-3000, to submit your request.

PDG Agency: App547 \$100
Lic550 \$ 50
CRF.....548 \$ 55/\$110
½ Renewal540 \$100
Service Fee..... BCF \$ 15

BOARD OF PRIVATE DETECTIVES AND GUARDS

Professional & Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii
1010 Richards Street - P.O. Box 3469
Honolulu, Hawaii 96801
Access this form via website at: www.state.hi.us/dcca/pvl

EMPLOYMENT RECORD OF PARTNER, OFFICER, DIRECTOR, MANAGER OR MEMBER OF PRIVATE DETECTIVE OR GUARD AGENCY

NAME OF PARTNER, OFFICER, DIRECTOR, _____
MANAGER OR MEMBER First Middle Last

NAME OF AGENCY APPLYING FOR LICENSE _____

List all employment within the last 10 years. Begin with your present employer. If you were suspended or discharged from any employment, explain below.

From Mo/Day/Yr	To Mo/Day/Yr	Position Held	Name & Address of Employer	Reason for Leaving

Explanations if you were suspended or discharged:

I hereby certify that all statements given here and/or attached thereto are true and correct to the best of my knowledge. I agree and understand that any misstatements of material facts herein may be cause for denial of license.

Subscribed and sworn to before me

This _____ day of _____, 20____

Signature of Partner, Officer, Director, Manager or Member

Notary Public

State of _____

My Commission expires: _____

BOARD OF PRIVATE DETECTIVES AND GUARDS

Professional & Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii
1010 Richards Street - P.O. Box 3469
Honolulu, Hawaii 96801
Access this form via website at: www.state.hi.us/dcca/pvl

EMPLOYMENT RECORD OF PARTNER, OFFICER, DIRECTOR, MANAGER OR MEMBER OF PRIVATE DETECTIVE OR GUARD AGENCY

NAME OF PARTNER, OFFICER, DIRECTOR, _____
MANAGER OR MEMBER First Middle Last

NAME OF AGENCY APPLYING FOR LICENSE _____

List all employment within the last 10 years. Begin with your present employer. If you were suspended or discharged from any employment, explain below.

From Mo/Day/Yr	To Mo/Day/Yr	Position Held	Name & Address of Employer	Reason for Leaving

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Subscribed and sworn to before me

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Signature of Partner, Officer, Director, Manager or Member

Notary Public

State of _____

My Commission expires: _____

BOARD OF PRIVATE DETECTIVES AND GUARDS

Professional & Vocational Licensing Division
Department of Commerce and Consumer Affairs
State of Hawaii
1010 Richards Street - P.O. Box 3469
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EMPLOYMENT RECORD OF PARTNER, OFFICER, DIRECTOR, MANAGER OR MEMBER OF PRIVATE DETECTIVE OR GUARD AGENCY

NAME OF PARTNER, OFFICER, DIRECTOR, _____
MANAGER OR MEMBER First Middle Last

NAME OF AGENCY APPLYING FOR LICENSE _____

List all employment within the last 10 years. Begin with your present employer. If you were suspended or discharged from any employment, explain below.

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Explanations if you were suspended or discharged:

I hereby certify that all statements given here and/or attached thereto are true and correct to the best of my knowledge. I agree and understand that any misstatements of material facts herein may be cause for denial of license.

Subscribed and sworn to before me

This _____ day of _____, 20 _____

Signature of Partner, Officer, Director, Manager or Member

Notary Public

State of _____

My Commission expires: _____

Private Detective/Agency Bond No. _____

Guard/Agency Bond No. _____

STATE OF HAWAII
BOARD OF PRIVATE DETECTIVES & GUARDS
DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
1010 Richards Street - P.O. Box 3469
Honolulu, Hawaii 96801
Access this form via website at: www.state.hi.us/dcca/pvl

BOND
PRIVATE DETECTIVE, GUARD OR AGENCY BOND

KNOW ALL MEN BY THESE PRESENTS:

THAT WE _____

of the County of _____, State of Hawaii, as

Principal, and _____

as Surety are held and firmly bound unto the State of Hawaii in the full and just sum of FIVE THOUSAND DOLLARS (\$5,000.00) lawful money of the United States of America, to be levied upon our respective, joint and several property, in case the conditions hereinafter set forth shall be violated.

For the just and full payment of which we hereby jointly and severally bind ourselves, and our respective heirs, executors, and administrators and assigns.

THE CONDITION OF THIS OBLIGATION IS SUCH, that

WHEREAS, the above bounden principal has otherwise qualified and will be duly licensed by the Board of Private Detectives and Guards of the State of Hawaii following the filing of this bond in accordance with Chapter 463, Hawaii Revised Statutes.

NOW, THEREFORE, if the said bounden principal shall fully and faithfully comply with all of the provisions of said Chapter 463 and the rules and regulations of the Board, then this obligation shall be void, otherwise it shall be and remain in full force and effect.

AND, as provided in Chapter 463 of the Hawaii Revised Statutes, any person injured by the willful, malicious or wrongful act of the principal may sue the surety for the recovery of any damages sustained, but the aggregate liability of the surety shall not exceed the face of the bond.

IT IS HEREBY stipulated and agreed that suit on this bond may be brought before a court of competent jurisdiction without a jury.

AND, this bond shall remain in full force and effect and shall run concurrently with the license period and for any renewals thereof, unless terminated or cancelled by the surety. Such termination or cancellation shall not be effective, however, until at least thirty (30) days shall have passed following the receipt of the notice of such termination or cancellation in the office of the Board and shall thereafter be relieved of any liability for any breach of condition occurring after the effective date of cancellation.

IN WITNESS WHEREOF, we the said principal and the said surety, have hereunto set our hands and seal this _____ day of _____ A. D. 20 _____.

Principal

Surety

By _____

**ACKNOWLEDGEMENT
(PARTNERSHIP OR INDIVIDUAL)**

STATE OF HAWAII

City and County of _____ } ss.

On this _____ day of _____, 20_____, before me personally came _____, to me known, and known to me to be the person(s) whose name(s) are subscribed to the above instrument, and acknowledged to me that _____ executed same.

NOTARIAL
SEAL

Notary Public State of _____
My Commission expires _____

**ACKNOWLEDGEMENT
(ENTITY)**

STATE OF HAWAII

City and County of _____ } ss.

On this _____ day of _____, 20_____, before me personally came _____, to me known, who, being duly sworn, did depose and say: That he resides in _____; that he is _____ of the entity described in and which executed the above instrument, and acknowledged to me that _____ executed same.

NOTARIAL
SEAL

Notary Public State of _____
My Commission expires _____

**ACKNOWLEDGEMENT
(SURETY)**

STATE OF HAWAII

City and County of _____ } ss.

On this _____ day of _____, 20_____, before me personally came _____, known to me to be attorney-in-fact for _____, and known to me to be the person whose name is subscribed to the above instrument, and acknowledged to me that _____ executed same.

NOTARIAL
SEAL

Notary Public State of _____
My Commission expires _____